



## **Report to the Legislature**

# **Services to Persons with Disabilities who are Residents of Residential Habilitation Centers and are Able to be Cared for and Choose to Live in Community Settings, or are Without Residential Services and at Immediate Risk of Institutionalization, or are Children Aging Out of Other State Services, or are Community Based Waiver Client Assessed as having Immediate Need for Increased Services**

Chapter 25, Laws of 2003, E1, Section 205(1)(c) Uncodified

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Department of Social & Health Services  
Aging and Disability Services Administration  
Division of Developmental Disabilities  
PO Box 45310  
Olympia, WA 98504-5310  
(360) 902-8470  
Fax: (360) 902-8482

## EXECUTIVE SUMMARY

Chapter 25, Laws of 2003, E1, Section 205(1)(c) requires the Department of Social and Health Services' Division of Developmental Disabilities (DDD) to report, within 45 days following each fiscal quarter, the number of persons moving into community settings through this section and the actual expenditures for all community services to support those residents. The proviso is intended to provide community residential and support services for a minimum of 43 clients including: 1) residents of Residential Habilitation Centers (RHC) who are able to be adequately cared for in community settings and who choose to live in those community settings; 2) clients without residential services who are in crisis or immediate risk of needing an institutional placement; 3) children who are aging out of other state services; and 4) current waiver clients who have been assessed as having an immediate need for residential services or increased support services.

## BACKGROUND

Residents of RHCs who are able to be adequately cared for in community settings and who choose to live in those community settings: Through a process adopted by DDD to implement Olmstead during the 2001-03 biennium, each individual living in an RHC, their guardian or close relative(s) will be asked annually whether they want to move to the community. If a person wants to move, the division will facilitate the move.

Children who are aging out of other state services: Children age out of DSHS Children's Administration (CA) services between the ages of 18 and 21. Children age out of DSHS Juvenile Rehabilitation Administration (JRA) services at age 18. Funding for their services through CA and JRA is specific to child serving administrations and dependent on these federal funding sources. The funds cannot accompany the child into DDD adult services.

Children enter CA services due to abuse and/or neglect in their family home and therefore are not able to be supported by their family. A number of the youth with developmental disabilities aging out of CA have medical or behavioral issues which cannot be adequately supported in Adult Family Homes, Adult Residential Care facilities or with Medicaid Personal Care. These youth require a more intensive level of support such as the DDD Supported Living Program.

Children enter JRA services due to criminal charges. A number of the youth with developmental disabilities aging out of JRA services have community protection issues including sexual offenses or violent crimes. They require 24-hour close supervision in order to maximize community safety. Families generally are not able to provide this level of support. They cannot reside in Adult Family Homes or Adult Residential Care facilities due to the risk they would present for other residents. These youth require supports at the level of a DDD 24-hour Community Protection program.

Clients without residential services who are in crisis or immediate risk of needing an institutional placement: Providing community services options to divert the need for institutionalization for persons with developmental disabilities is a long-term state and national trend. A number of DDD clients who are eligible for, and have the right to services in an ICF/MR experience a crisis due to the loss of, or lack of needed supports that places their health and safety at risk. This may occur when they lose a caregiver such as an elderly parent or a contracted community provider is no longer able to meet their significant

support needs. These persons are at risk of institutionalization without sufficient community supports to meet their health and safety needs.

Current waiver clients who have been assessed as having an immediate need for residential services or increased support services: A review of DDD's Cap waiver was conducted by the Center for Medicare Medicaid Services (CMS) July 2001 – January 2002. The CMS report from this review states in Recommendation #4: "Remove all provisions from existing laws, regulations, policies and procedures that support or encourage denying CAP clients access to needed waiver services due to funding limitations. At the same time, laws and policies should be implemented recognizing the need to fully fund the waiver services CAP participants are assessed to need." In discussions that were held about Washington's applications for the current four new DDD Home and Community Based Waivers, federal officials in Baltimore separately asked for assurance that Washington will meet waiver participant needs. As the CMS required yearly Plans of Care are completed for waiver participants, clients are assessed as having unmet health and safety needs. It is imperative services be authorized in order to not jeopardize continued federal funding (FFP) for Washington State under the current four DDD HCBS waivers.

In this current proviso, the Legislature appropriated funds in the 2003-05 biennium to serve 14 residents of RHCs who are able to be adequately cared for in community settings and who choose to live in those community settings, and clients without residential services who are at immediate risk of institutionalization or in crisis. In addition, the legislature appropriated funds in the Supplemental 2004 budget to provide community residential and support services for a minimum of twenty-nine (29) additional individuals and included children who are aging out of other state services and current home and community-based waiver program clients who have been assessed as having an immediate need for increased services. These funds provided an average daily rate of \$300.00 per client/per day. Additional individuals can be served if the department is able to limit new client placement expenditures to 90 percent of the budgeted daily rate and provided the total projected carry-forward expenditures do not exceed the amounts estimated.

## STATUS

The Division of Developmental Disabilities has placed eight (8) clients during the quarter April through June 2004. The total number of people being served under the proviso currently is twenty-four (24) with an average daily rate of \$274.02 (See attached spreadsheet).

Following is a description of the needs of two persons served who meet the criteria of "children who are aging out of other state services." These client descriptions are provided to offer information about this particular population.

JE is 18 years old and was placed in a DDD Community Protection Supported Living program in June 2004. In May 2004, DDD was notified that he could no longer be served in his Children's Administration placement in a Staffed Residential Home due his sexual acting out and his refusal to return to school in Fall 2004. Since he was over 18 years of age, he could not be placed in another Children's Administration residential facility and he was referred to DDD for placement. JE has diagnosis of Mild Mental Retardation and Conduct Disorder. He has a history of impulsivity, aggression, property destruction and fire setting. In March 2004, he was accused of two counts of indecent liberties involving two under-aged high school girls (one being a 15 year old girl with autism). A psychosexual evaluation completed for him states "JE is at risk for further law breaking behavior, including assault and sexual offending"...he requires constant supervision and eyes on monitoring in the community to ensure the safety of the vulnerable." Records indicate JE's mother used alcohol and drugs during her pregnancy with him and that he experienced physical abuse throughout his childhood.

CN is 19 years old and until 4/4/04, she lived in a foster home. On this date, she made suicidal gestures by attempting to cut herself and was admitted to a community psychiatric hospital unit. The foster home stated they could no longer support her. Since she was over the age of 18, she could not be placed in another Children's Administration facility and she was referred to DDD for residential services. CN has a long history of aggressive, angry and assaultive behaviors. She was placed in foster care as a toddler due to being sexually abused by her father.

COMMUNITY RESIDENTIAL PROVISO 4th QUARTER 2004  
(Olmstead/Crisis)

	Previous Residence	Moved to	Start Date	Residential Rate	Employment day Prog Rate	Therapies	Other	Total Daily Rate
MC	Fircrest	Region 4	10/29/2003	260.28	23.89	11.84	1.06	297.07
CP	Rainier	Region 4	10/31/2003	260.55	23.89	1.64	1.06	287.14
DB	Fircrest	Region 4	2/2/2004	255.25	23.89	2.53	1.06	282.73
AG	Rainier	Region 4	2/17/2004	255.25	23.89	29.69	1.06	309.89
BS	Rainier	Region 4	3/1/2004	272.16	23.89	3.95		300.00
SF	Fircrest	Region 4	3/17/2004	271.01	23.89	3.65	1.06	299.61
AM	Fircrest	Region 4	3/22/2004	256.26	23.89	7.90	1.06	289.11
NF	Fircrest	Region 4	5/4/2004	248.08	23.89	5.92		277.89
JW	Rainier	Region 4	5/10/2004	262.87	23.89	11.18		297.94
JK	Rainier	Region 4	5/10/2004	262.87	23.89	11.18		297.94
EDW	Rainier	Region 4	5/10/2004	262.87	23.89	11.18		297.94
SS	Fircrest	Region 4	6/8/2004	256.08		3.95	56.04	316.07
KE	Fircrest	Region 4	6/14/2004	267.43	23.89	7.56	1.06	299.94
Sub Total Average								296.41
JH		Region 3	7/1/2003	239.28				239.28
CDJ		Region 3	7/1/2003	200.00				200.00
GC		Region 4	7/26/2003	149.01				149.01
RB		Region 3	8/1/2003	158.66				158.66
CC		Region 3	8/18/2003	242.46				242.46
MM		Region 4	8/21/2003	280.00				280.00
SB		Region 5	12/3/2003	266.00	20.00	15.00		301.00
PM		Region 6	1/14/2004	371.44				371.44
AC		Region 4	2/7/2004	250.00				250.00
CN		Region 4	4/5/2004	229.51		14.8		244.31
JE		Region 1	6/7/2004	287.03				287.03
Sub Total Average								247.56
Average Daily Rate								274.02